



CITY OF SAN ANTONIO
DEVELOPMENT SERVICES DEPARTMENT

Re-Submittal Form

FROM

This form is to accompany two copies of all paperwork and/or drawings to be submitted **along with** a cover letter that includes a brief narrative of the changes/corrections that were made for each trade.

AP #: _____

Company Name: _____

Contact Person: _____

Phone #: _____ Fax #: _____ E: Mail _____

TO

Trade:

ATTN (Reviewer's name):

- | | |
|---|-------|
| <input type="checkbox"/> Building | _____ |
| <input type="checkbox"/> Fire | _____ |
| <input type="checkbox"/> Mechanical | _____ |
| <input type="checkbox"/> Electrical | _____ |
| <input type="checkbox"/> Plumbing | _____ |
| <input type="checkbox"/> Traffic/Sidewalk | _____ |
| <input type="checkbox"/> Drainage | _____ |
| <input type="checkbox"/> Tree | _____ |
| <input type="checkbox"/> Landscape | _____ |
| <input type="checkbox"/> Irrigation | _____ |
| <input type="checkbox"/> Health | _____ |
| <input type="checkbox"/> Historical | _____ |
| <input type="checkbox"/> SAWS | _____ |
| <input type="checkbox"/> Neighborhood | _____ |

Comments: _____